File the original with:

248679

## Request for Cancellation of Certificate

2010-12-T

Mail or fax a copy to:

Public Service Commission of South Carolina Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199	S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
DATE: January 22, 2014	
Please consider this a request to cancel n	ny:
Class C Taxl Certificate	Class A Restricted Certificate
Class C Charter Certificate	<del></del>
Class C Charter Bus Certificate	
Non-Emergency Certificate	
Class E Household Goods Certificate	<b>e</b>
Class E Hazardous Wastes Certificat	te
My Certificate Number is 8233	
Maya Group, LLC	DBA Charleston Downtown Limo/Tropical Taxi
(Name of Company)	(If applicable)
209 Meeting Street	1347 Ashley Hall
(Street Address)	(Mailing Address if different from Street Address)
Charleston, SC 29401	Charleston SC 29407
(City, State, Zip Code)	(City, State, Zip Code)
843/412-6146	a)
(Telephone Number)	O LA
	(Signature)
	Sam Mudola
	(Title) Owner, President, etc.

**ORS Revised 2-18-10**